

# EPA REGION 1 RLF WORKSHOP

APRIL 6-7, 2017



Federal Financial Report SF-425



- <u>Purpose</u>: To report your grant expenditures, progress toward meeting your required cost share, and use of program income.
- Due: Annually 90 days after the reporting period (Oct 1 – 30 Sep).
- Send to:
  - Las Vegas Finance Center <a href="mailto:lvfc-grants@epa.gov">lvfc-grants@epa.gov</a>
  - Your Project Officer
  - Your Grants Specialist
- Location: Form can be found at Grants.gov.



View Burden Statement			Federal Financial Report (Follow form Instructions)				OMB Number: 4040-0014 Expiration Date: 01/31/2019
1. Federal Agency and Organizational Element to Which Report is Submitted     2. Federal Grant or Other Identifying Number Assigned by Agency (To report multiple grants, use FFR Attachment)							, ,
US Environmental Protection Agency						ant Number	
3. Recipient Organization (Name and complete address including Zip code)							
Recipient Organization Name: Your Organization's Name							
Street1:	Your Orga	Your Organization's Address					
Street2:	Street2:						
City:	Your Organization's City/Town County:						
State:	Select fro	from list Province:					
Country: USA: UNITED STATES ZIP / Postal Code: Your Organization's Zip Code							
4a. DUNS Number Your DUNs #		4b. EIN Your Employer ID Number		5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)  Your Account Number			
6. Report Type		7. Basis of Accounting	Period		9. Reporting Pe	eriod End Date	
Quarterly		X Cash	From: To:			09/30/201	16
Semi-Annual		Accrual	10/01/2015 09/30/202		0/2020		
X Annual Final							
l III III III III III III III III III I							





10. Transactions	Cumulative
(Use lines a-c for single or multiple grant reporting)	
Federal Cash (To report multiple grants, also use FFR attachment):	
a. Cash Receipts	0.00
b. Cash Disbursements	0.00
c. Cash on Hand (line a minus b)	0.00
(Use lines d-o for single grant reporting)	
Federal Expenditures and Unobligated Balance:	
d. Total Federal funds authorized	\$1,000,000.00
e. Federal share of expenditures	\$120,449.50
f. Federal share of unliquidated obligations	\$0
g. Total Federal share (sum of lines e and f)	\$120,449.50
h. Unobligated balance of Federal Funds (line d minus g)	\$879,550.50

- d. The federal portion of your grant.
- e. Federal funds you have incurred and were reimbursed by EPA.
- f. Federal funds you have incurred and have not yet been reimbursed by EPA.
- g. Form calculates the amount of federal funds expended (sum of e & f).
- h. Form calculates the amount of federal funds remaining.





Recipient Share:	
i. Total recipient share required	\$200,000.00
j. Recipient share of expenditures	\$12,000.00
k. Remaining recipient share to be provided (line i minus j)	\$188,000.00
Program Income:	
I. Total Federal program income earned	\$10,000.00
m. Program Income expended in accordance with the deduction alternative	\$0
n. Program Income expended in accordance with the addition alternative	\$0
o. Unexpended program income (line I minus line m or line n)	\$10,000.00

- i. Your **required** cost share 20% of federal award amount.
- j. The amount of cost share you have contributed so far.
- k. Form calculates remaining cost share to be contributed.
- I. Program income you have earned including interest.
- m. Leave blank
- n. Program income you have expended.
- o. Form calculates amount of program income available.





11. Indirect Expense							
a. Type b. Pate c. Period From Period To	d. Base e. Amount f. Federal Share						
g. Totals:							
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:							
Add Attachment Delete Attachment View Attachment							
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, section 1001)							
a. Name and Title of Authorized Certifying Official							
Prefix: First Name: Revolvina	Middle Name: Lowen						
Last Name: Funda Suffix:							
Title: Director							
b. Signature of Authorized Certifying Official	c. Telephone (Area code, number and extension)						
You can print, sign & scan	123-456-7890						
or use an electronic signature							
d. Email Address	e. Date Report Submitted 14. Agency use only:						
RLF@myorganization.org	10/30/2017						



- Final Reports: Follow the same steps just check Final in box 6. You need to show that all your required cost share is provided and program income is accounted for.
- Due: 90 days after the grant performance period ends.

#### Send to:

- Las Vegas Finance Center <a href="mailto:lvfc-grants@epa.gov">lvfc-grants@epa.gov</a>
- > Your Project Officer
- > Your Grants Specialist



## Questions?

